ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-01976A Tall Pine Estates Water & Improvements Association, HC 31 Box 25 Mormon Lake, AZ 86038



MAR 1 8 2008

AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES

ANNUAL REPORT

FOR YEAR ENDING

12 31 2007

FOR COMMISSION USE

ANN 04

07

PROCESSED BY:

SCANNED

COMPANY INFORMATION

Mailing Address HC 31	10) Tall Pines Estates War Box 25		
Morrin Lake (City)	A2 (State)	G	06128
(City)	(State)		(Zip)
928-354-2505			
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
Email Address / Meumann	@ MSN. COM		
Local Office Mailing Address	Same as above (Street)		
(City)	(State)		(Zip)
928-354-2664 (a	Iternate to # above)		× +/
Local Office Telephone No. (Include Area Cod	de) Fax No. (Include Area Code)	Cell No. (In	nclude Area Code)
			,
	ANAGEMENT INFORMATI	ON L	
Management Contact: <u>L</u> 4	rida Meumann (Name)	Secretary	-Trensus
Management Contact: 4	rida Meumann (Name)	Secretary	-Trensus (Zip)
Management Contact: Ly HC 31 Box 25 (Street) 928-354-2565	ida Meumann (Name) Mormon Lake (City)	Secretary	-Trensum Fitle) 86038 (Zip)
Management Contact: Ly HC 31 Box 25 (Street) 928-354-2505 Telephone No. (Include Area Code)	rida Meumann (Name) Mormon Lake (City) Fax No. (Include Area Code)	Secretary AZ (State)	Transun (Title) 86038 (Zip)
Management Contact: Ly HC 31 Box 25 (Street) 928-354-2505 Telephone No. (Include Area Code)	ida Meumann (Name) Mormon Lake (City)	Secretary AZ (State)	
Management Contact: Ly HC 31 Box 25 (Street) 928-354-2505 Telephone No. (Include Area Code) Smail Address / Meumann	Mormon Lake (City) Fax No. (Include Area Code) MSN. COM	Secretary AZ (State)	
Management Contact: Ly HC 31 Box 25 (Street) 928-354-2505 Telephone No. (Include Area Code) Smail Address / Meumann On Site Manager: JAse Same as abo	Mormon Lake (City) Fax No. (Include Area Code) Mondon Lake (City) Fax No. (Include Area Code) Mondon Huber (Name)	Secretary AZ (State) Cell No. (Inc	
Management Contact: Ly HC 31 Box 25 (Street) 928-354-2505 Telephone No. (Include Area Code) mail Address / Meumann On Site Manager: JASe Same as abo (Street)	Mormon Lake (City) Fax No. (Include Area Code) Mondana Meumann (Name) Fax No. (Include Area Code) Mondana Meumann (City)	Secretary AZ (State) Cell No. (Inc.)	
Management Contact: Ly HC 31 Box 25 (Street) 928-354-2505 Telephone No. (Include Area Code) mail Address / Meumann On Site Manager: JASe Same as abo (Street)	Mormon Lake (City) Fax No. (Include Area Code) Mondana Meumann (Name) Fax No. (Include Area Code) Mondana Meumann (City)	Secretary AZ (State) Cell No. (Inc.)	lude Area Code) (Zip)
Management Contact: Ly HC 31 Box 25 (Street) 928-354-2505 Telephone No. (Include Area Code) mail Address / Meumann On Site Manager: JASe Same as abo (Street)	Mormon Lake (City) Fax No. (Include Area Code) Mondon Lake (City) Fax No. (Include Area Code) Mondon Huber (Name)	Secretary AZ (State) Cell No. (Inc.)	lude Area Code) (Zip)

Statutory Agent: Lin	ida Meumann				
HC31 Box 25 (Street) 928-354-2505	Mormon Lake (City)	AZ (Casa)	86038		
928-354-2505	<i>♣</i>	(State)	(Zip)		
Telephone No. (Include Area Code)	Fax No. (Include Area Code	Cell No. ((Include Area Code)		
Attorney: N/A	(Name)				
	(traine)				
(Street)	(City)	(State)	(Zip)		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)		
Email Address			and the code		
Please mark this box if the ab	ove address(es) have changed or ar	e updated since tl	ne last filing		
	OWNERSHIP INFORMATI		io mot mmg.		
Check the following box that applie					
Sole Proprietor (S)	X C Corporation (C) (Other than A	ssociation/Co-op)		
Partnership (P)	Subchapter S Co	orporation (Z)			
Bankruptcy (B)	Association/Co-o	ор (А)			
Receivership (R)	Limited Liability	Company			
Other (Describe)					
	COUNTIES SERVED				
Check the box below for the county	lies in which you are certificated to pro-	ovide service:			
☐ APACHE	☐ COCHISE	🛚 COCONI	NO		
☐ GILA	☐ GRAHAM ☐ GREENLEE				
☐ LA PAZ	☐ MARICOPA	☐ MOHAVI	${f E}$		
☐ NAVAJO	☐ PIMA	☐ PINAL			
☐ SANTA CRUZ	☐ YAVAPAI ☐ YUMA				
☐ STATEWIDE					

COMPANY NAME Tall Pines Estates Water and Improvements Assn., Inc.

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization		(12)	
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	3957.		
307	Wells and Springs	13/1		
311	Pumping Equipment	18,076		
320	Water Treatment Equipment	10,010		
330	Distribution Reservoirs and Standpipes	41,450		
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants	896		
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment	10,743		
340	Office Furniture and Equipment	7 1		
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment	4934		
348	Other Tangible Plant	1 9 211		
	TOTALS	80,056.	65,666.	14,390,

This amount goes on the Balance Sheet Acct. No. 108-

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acet. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			(IAZ)
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			-
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			1.080,

This amount goes on the Comparative Statement of Income and Expense _ Acct. No. 403.

BALANCE SHEET

Acct No.	ASSETS	BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ 45.140	Φ.
134	Working Funds	\$ 45,140	\$ 50,185,
135	Temporary Cash Investments		
141	Customer Accounts Receivable	4.70	
146	Notes/Receivables from Associated Companies	5579.	
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
		\$	\$
101	FIXED ASSETS		
101	Utility Plant in Service	\$ 90,852.	\$ 60,056.
103	Property Held for Future Use		00,036.
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	64,586	65,666.
121	Non-Utility Property		971000.
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$ 6266.	\$ 14.390
	TOTAL ASSETS		\$ 14,390. \$ 64,575.
	A C A LAKA TADJUKU	\$ 56,984.	\$ 64.575

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.	LIABILITIES	BALANCE AT BEGINNING OF YEAR		
	CURRENT LIABILITES			
231	Accounts Payable	\$		
232	Notes Payable (Current Portion)	Þ	\$	
234	Notes/Accounts Payable to Associated Companies			
235	Customer Deposits			
236	Accrued Taxes			
237	Accrued Interest		383	
241	Miscellaneous Current and Accrued Liabilities		*	
	TOTAL CURRENT LIABILITIES	6		
		\$	\$	
	LONG-TERM DEBT (Over 12 Months)			
224	Long-Term Notes and Bonds			
	<u> </u>	\$	\$	
	DEFERRED CREDITS			
251	Unamortized Premium on Debt			
252	Advances in Aid of Construction	\$	\$	
255	Accumulated Deferred Investment Tax Credits			
271	Contributions in Aid of Construction			
272	Less: Amortization of Contributions			
281	Accumulated Deferred Income Tax			
	TOTAL DEFERRED CREDITS			
	OXEDITO	\$	\$	
	TOTAL LIABILITIES			
		\$	\$ 383	
	CAPITAL ACCOUNTS			
201	Common Stock Issued			
211	Paid in Capital in Excess of Par Value	.\$	\$	
215	Retained Earnings			
218	Proprietary Capital (Sole Props and Partnerships)	56,984.	64,193	
	TOTAL CAPITAL	0 0		
		\$ 56,984.	64,193	
	TOTAL LIABILITIES AND CAPITAL	\$ 56,984	6 64,575.	

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES		PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	 -	\$	
460	Unmetered Water Revenue			\$ 5
474	Other Water Revenues	<u>'</u>	14, 200.	18,250.
	TOTAL REVENUES		\$ 17 200 -	4,000.
	132.1025		\$ 17,200.	\$ 22,250.
	OPERATING EXPENSES			
601	Salaries and Wages		\$ 5 MAR.	
610	Purchased Water		\$ 5,000.	\$ 5,000.
615	Purchased Power		1.1.1	
618	Chemicals		1474	1609
620	Repairs and Maintenance	-		
621	Office Supplies and Expense	/	11.9421	4328,
630	Outside Services	_/	54.1	258.
635	Water Testing		0.	70
641	Rents	-/	372	1109.
650	Transportation Expenses			
657	Insurance – General Liability	-		59,
659	Insurance - Health and Life		3172.	3195.
666	Regulatory Commission Expense – Rate Case			
675	Miscellaneous Expense			
403	Depreciation Expense	/	110./	149.
408	Taxes Other Than Income		1080.1	1080.
408.11		_/	479.	94.
409	Property Taxes Income Tax	_ /	562	450.
409				
	TOTAL OPERATING EXPENSES	/	\$ 24,395,1	\$ 17,398.
	ODED A TIME CANCOLATION			,
	OPERATING INCOME/(LOSS)	r ;	(-7,195.)	\$ 4852.
	OTHER INCOME/(EXPENSE)			
419	·			
421	Interest and Dividend Income 1336. Non-Utility Income	V 3	336,	\$ 1256.
426	Miscellaneous Non-Utility Expenses			1100,
427	Interest Expense			
741				
	TOTAL OTHER INCOME/(EXPENSE)	- 9	1334.	\$ 1256,
	NET INCOME/(LOSS)	9	(-5859)	\$ 7208.

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	Lo	AN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued					
Source of Loan		(مور			
ACC Decision No.	//	181			
Reason for Loan					
Dollar Amount Issued	\$	9	\$	\$	\$
Amount Outstanding	\$	9	\$	\$	\$
Date of Maturity					
Interest Rate		%	%	%	%
Current Year Interest	\$	\$	}	\$	\$
Current Year Principle	\$	\$		\$	\$

Meter Deposit Balance at Test Year End	\$ O	
Meter Deposits Refunded During the Test Year	\$ 0	

COMPANY NAME	Tall Pines Estates Water and Ing. asaw., Onc.
Name of System:	ADEQ Public Water System Number:

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55-9(18-09)	3	80	8		N/A	
55-28 C80-1	3	80	8		}	
55- CR8-400	3	80	8			
* Arigona Danasta	C311 / D	as Idontification N.				

Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
4			

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
20,000 gal.			
,			

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	Tall Pines &	states Water and Improvements assn. Inc.
Name of System:		ADEQ Public Water System Number:

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS				
Size (in inches)	Material	Length (in feet)		
(2)				
3				
4				
5				
6				
8				
10				
12				
		<u> </u>		

CUSTOMER	METERS
Size (in inches)	Quantity
5/8 X ³ / ₄	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Tubo 4	
Comp. 6	
Tubo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

None

STRUCTURES:

20,500 Storage Tank

Metal pump house

OTHER:

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	Tall Pines Estates Water and Ingertement asen., Inc.
Name of System:	ADEQ Public Water System Number:
	J. Marie C.

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2007

MONTH/YEAR	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED	GALLONS PURCHASED
JANUARY \		(Thousands)	(Thousands)	(Thousands)
FEBRUARY		·		
MARCH				
APRIL	73/	Not		
MAY		metered		
JUNE	2001	Meleria		
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
	$TOTALS \rightarrow$			

(If more than one well, please list each separately.)	
If system has fire hydrants, what is the fire flow requirement?GPM forhrs	
If system has chlorination treatment, does this treatment system chlorinate continuousl () Yes () No N/A	y?
Is the Water Utility located in an ADWR Active Management Area (AMA)? () Yes (X) No	
Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement () Yes (X) No	?
If yes, provide the GPCPD amount:	

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMP	ANV	NI A	NATO:
COME	AUN X	INA	MAIN H

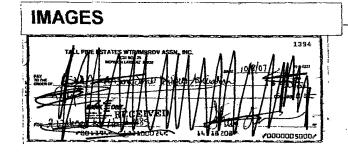
YEAR ENDING 12/31/2007

PROPERTY TAXES			
Amount of actual property taxes paid during Calendar Year 2007 was: \$449.56			
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.			
If no property taxes paid, explain why			

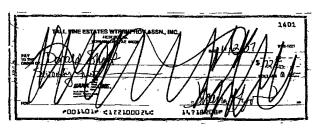


October 18, 2007 through November 19, 2007

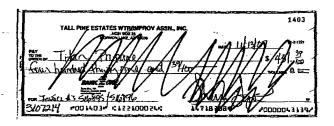
Primary Account: 00000014718208



005540798560 OCT 25 #0000001394 \$50.00

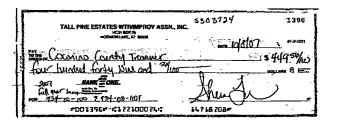


006310057513 NOV 07 #0000001401 \$72.00

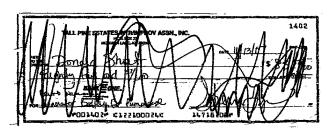


002210195263 NOV 16 #0000001403 \$431.39

ACCOUNT # 000000014718208



006310653255 OCT 23 #0000001396 \$449.56



006310727018 NOV 16 #0000001402 \$85.57



VERIFICATION AND SWORN STATEMENT Taxes

MAR 1 8 2008

CORP COMM
Cector Utilities

VERIFICATION

STATE OF Arizona

I, THE UNDERSIGNED

OF THE

CO	UNTY OF (COUNTY NAME) COCONINO
	Linda Maumann, Secretary
1	all Pines Estates Water + Imp assn., In

 $\underline{\text{DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE } \underline{\text{ARIZONA CORPORATION COMMISSION}}$

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

SIGNATURE OF OWNER OR OFFICIAL

928-3542505

TELEPHONE NUMBER

TY OF COUNTY NAME COCONINO

CH MONTH FARCH .2008

VILLED CHURO

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

OFFICIAL SEAL
TERESA L WAYNE
NOTARY PUBLIC State of Arizona
COCCONINO COUNTY
My Comm. Expires Seb. 16, 2010

THIS

1/6/2010

COMPANY NAME Tau Pines Estates Water & Ing. ass. Inc. YEAR ENDING 12/31/2007 INCOME TAXES

For this reporting period, provide the following:	
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability	N/A
State Taxable Income Reported Estimated or Actual State Tax Liability	
Amount of Grossed-Up Contributions/Advances:	
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances	
any Payer or if any gross-up tax refunds have alread	Il refund any excess gross-up funds collected at the close suant to this Decision, if gross-up tax refunds are due to y been made, attach the following information by Payer: nt of gross-up tax collected, the amount of refund due to r has made the refund to the Payer.
CERTIFICATION	
Prior four a difficult follows. This Economication is to be	efunded to Payers all gross-up tax refunds reported in the signed by the President or Chief Executive Officer, if a rtnership; the managing member, if a limited liability p.
Linda K. Meumann	2/22/08
SIGNATURE	DATE
Linda K. Meumann PRINTED NAME	Secretary - Treasurer
PRINTED NAME	TITE

VERIFICATION AND SWORN STATEMENT

Intrastate Revenues Only

MAR I 8 2008

OGP COMM

VERIFICATION

STATE OF Arizona

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)

Coconino

NAME (OWNER OR OFFICIAL) TITLE

LINDA MEUMANN, Secretary-Treasurer

COMPANY NAME

COMPANY NAME

Tall Pines & states Water & Improvement asso, Inc.

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR
12 31 2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2007 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 22,250.00

(THE AMOUNT IN BOX ABOVE INCLUDES \$ 0

IN SALES TAXES BILLED, OR COLLECTED)

928- 354-2505

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

DAY OF

MONTH MARCH

,2008

COCONINO COUNTY
My Comm. Expires Feb., 15, 2010.

TERESA L. WAYNE

COMMISSION EXPIRES A / (1/20/0)

Verica Z Wayre

TELEPHONE NUMBER

a CONNO

VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

MAR 1 8 2008

AL CORP COMM

Director Utilities

Intrastate Revenues Only

VERIFICATION

OF THE

STATE OF ARIZONA

I, THE UNDERSIGNED

COUNTY OF (COUNTY NAME)	
Conina	
NAME (OWNER OR OFFICIAL) LINDA K. Meumann	Sevetary- Treasurer
Tall Pines Estates Water , of	marvement asso. Inc

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR
12 31 2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2007 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES \$	THE AMOUNT IN BOX AT LEFT INCLUDES \$ O IN SALES TAXES BILLED, OR COLLECTED)
*RESIDENTIAL REVENUE REPORTED ON THIS PA MUST INCLUDE SALES TAXES BILLED.	GE SIGNATURE OF OWNER OR OFFICIAL 928-354-2505 TELEPHONE NUMBER
SUBSCRIBED AND SWORN TO BEFORE I	TERESA L. WAYNE
A NOTARY PUBLIC IN AND FOR THE CO	0000000

55 2010 EXPERES 5, 2010

OFFICIAL SEAL
TERESA L. WAYNE
NOTARY PUBLIC - State of Arizona
COCONINO COUNTY

X Verena d' Wayse SIGNATURE OF NOTARY PUBLIC